

Public Accounts Committee

Meeting Venue:

Committee Room 4 – Ty Hywel

Meeting date:

Tuesday, 18 February 2014

Meeting time:

09:00

Cynulliad
Cenedlaethol
Cymru

National
Assembly for
Wales



For further information please contact:

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Committee Clerk

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Agenda

1 Introductions, apologies and substitutions (09:00)

2 Papers to note (09:00)

Caldicot and Wentlooge Levels Internal Drainage Board: Letter from the Minister for Natural Resources and Food (5 February 2014) (Page 1)

3 Motion under Standing Order 17.42 to resolve to exclude the public from the meeting for the following business: (09:05)

Items 4, 5, 6, 7 and 8

4 Grants Management in Wales: 2013 Welsh Government Annual Report

(09:05–09:20) (Pages 2 – 49)

PAC(4)-06-14 (paper 1)

5 Covering Teachers' Absence: Consideration of further evidence (09:20 – 09:50) (Pages 50 – 66)

PAC(4)-06-14 (paper 2)

PAC(4)-06-14 (paper 3)

6 Health Finances 2012–13 and Beyond: Consideration of further evidence (09:50–10:15) (Pages 67 – 72)

PAC(4)-06-14 (paper 4)

7 Unscheduled Care: Consideration of further evidence (10:15–10:40) (Pages 73 – 78)

PAC(4)-06-14 (paper 5)

8 Meeting the Financial Challenges Facing Local Government in Wales: Briefing from the Wales Audit Office (10:40–11:00)

Alun Davies AC / AM
Y Gweinidog Cyfoeth Naturiol a Bwyd
Minister for Natural Resources and Food



Llywodraeth Cymru
Welsh Government

Eich cyf/Your ref
Ein cyf/Our ref AD-/00159/14

Darren Millar AM
AM Clwyd West
Chair - Public Accounts
Committee
Ty Hywel
Cardiff Bay
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5

February 2014

Caldicot and Wentlooge Levels Internal Drainage Board

Thank you for your letter of 21 January requiring further clarification of the future auditing arrangements regarding cross border Internal Drainage Boards (IDB).

We have considered alternative options and have not identified any practical way forward, other than through legislation. For the cross border bodies this would need the consent of UK Government before progressing.

To address the specific point that the Committee has raised, IDBs are funded through local charges and levies. Welsh Government does not provide any central funding or any grant funding for them.

Alun Davies AC / AM
Y Gweinidog Cyfoeth Naturiol a Bwyd
Minister for Natural Resources and Food

Agenda Item 4

By virtue of paragraph(s) ix of Standing Order 17.42

Document is Restricted

Owen Evans
Cyfarwyddwr Cyffredinol • Director General

Yr Adran Addysg a Sgiliau
Department for Education and Skills



Llywodraeth Cymru
Welsh Government

Mr Darren Millar AM
Chair
Public Accounts Committee
National Assembly for Wales

7 February 2014

Dear Mr Millar

Thank you for your invitation to attend the Committee meeting on 14th January and present our evidence on the findings of the Auditor General in his report on *Covering Teachers' Absence*.

During the meeting you asked us to provide additional supplementary information which I have set out below in relation to the five key issues.

1. The number of supply teachers registered and listed on both local authority and agency lists.

- This data is not collected and therefore we cannot provide the information requested. However as we stated in evidence to the Committee, we are working with the General Teaching Council for Wales (GTCW) to make direct contact with supply teachers. We will seek agreement from them to allow their contact details to be used to provide them with relevant information and advice. We will also use this process to collect data (subject to agreement of the supply teachers) to identify with whom they are registered. We intend to complete this process by June 2014.

2. The numbers of sick absence days taken by teachers and whether there is a pattern of causes.

- As part of our evidence, we provided the latest available information from the Statistics for Wales bulletin on "Teachers in service, vacancies and sickness absence" (January 2013) which identified that the number of sick days taken by teachers during 2012 was 187,377 which was over 25,000 less than in 2011. I attach a copy of this bulletin for information at annex 1. (This document is not available in Welsh.)
- In terms of pattern of causes the report from the Wales Audit Office report stated "neither schools nor local authorities routinely monitor adequately the reasons for teachers' absence, and therefore do not always understand the reason why cover is required" (Page 18, paragraph 1.13). We are therefore currently unable to confirm if there is a pattern of causes in relation to sickness absence taken by teachers. We

will, however, raise this issue in our discussions with the WLGA to ask them to work with local authorities to establish a consistent system for the collection of this data which would allow a more detailed analysis of all absences.

- As we stated during the committee hearing, we will be developing guidance for schools and local authorities which will support them to address the issues concerned with teacher absence. In particular the guidance will provide information on how the attendance and absence of teachers should be monitored and managed effectively. This guidance is due to be published in September 2014. We will also request that Estyn undertake a thematic study during 2016/17 to identify how successfully the guidance has been adopted.

3. The numbers of newly qualified teachers undertaking induction via the supply route

- As of 30th January 2014, a total of 543 supply teachers are registered with GTCW as undertaking their statutory induction.

4. The number of supply teachers undertaking Masters in Education practice (MEP).

- As of 30th January 2014, a total of 13 supply teachers are registered for the MEP – 12 teachers in Cohort 2 and 1 teacher in Cohort 1. Participation in the MEP is optional and all prospective students are subject to the same eligibility criteria. Information on participation in the MEP is available to all newly qualified teachers through the Welsh Government and GTCW websites.

5. A note on how effective the external mentoring scheme is and whether the investment in the scheme is providing good VFM

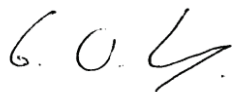
- The external mentor role has been introduced to provide all newly qualified teachers (NQTs) in Wales with consistent, high quality support from experienced practitioners throughout their statutory induction period and through the three years of the MEP (for those NQTs who choose to undertake the MEP).
- The rationale for the external mentor role enables mentors to have the opportunity to work across a range of schools, sharing best practice and working in collaboration with their cohort of NQTs and with other mentors, both regionally and nationally. There are also tangible benefits for each mentor's school as they are able to use their mentoring resources within their own school and bring back and share the good practice they have observed in other schools. This is deliberately a cyclical approach to ensure that the mentor role benefits both the mentee and the mentor's school and forms part of the wider approach of school to school support the Welsh Government is developing.
- External mentors work with their NQTs on a part time basis. The amount of time that each mentor is required to dedicate to the role will depend on the number of NQTs that they are supporting and whether the NQTs are undertaking induction only or the MEP and induction combined. The funding has been calculated on the basis that if a mentor supports between 18 and 24 NQTs per year (which equates to the equivalent of 3 days per week) then the mentor's school receives sufficient funding to allow them to employ a full time NQT to cover the mentor's absence. This clearly creates some flexibility in how schools may decide to deploy the remaining time of the mentor

in the school. In practice, with the scheme still at a relatively early stage of development, most mentors are currently supporting a lower number of NQTs.

- The part time release and the nature of the induction and MEP programmes mean that the mentors largely have responsibility for their own timetables so they are able to plan their time away from school in advance to ensure that they are able to fulfil their role as a mentor whilst also remaining fully committed to their school role. This ensures their school is able to plan effective arrangements to cover their absence that ensures continuity of learning for those learners affected.
- The MEP programme has been running for 16 months. The second cohort of NQTs and mentors commenced the programme in January 2014 and showed an increase in numbers over the first cohort.
- The programme is therefore still at a relatively early stage, but initial feedback from the majority of students and mentors shows they are keen to remain with the programme for the full three years. Where there have been student drop outs or mentor resignations these have, in the main, been due to personal issues or changes in employment rather than an active decision to withdraw from the programme.
- Initial, informal analysis demonstrates that the MEP is providing value for money, with the most positive feedback directed at the external mentor role. MEP students and their headteachers consider that the practice based support provided by the external mentors is a unique component of a Masters programme.
- A formal external evaluation is due to report in Spring 2015. This evaluation will assist in determining whether the MEP contract should be extended. Value for money will therefore be one of the core evaluation criteria that will be considered. In the longer term, Estyn will also be asked to undertake a thematic study which will focus on the impact of the MEP on raising standards of teaching and improving learner outcomes.

I hope the additional information that has been provided addresses the issues that you raised. If you require any further detail, please contact me and I will endeavour to address your request.

Yours sincerely,



Owen Evans

Teachers in service, vacancies and sickness absence, January 2013

This Statistical First Release presents data on the number of teachers in service, vacancies for full-time permanent teachers in maintained schools in Wales as at January 2013, and sickness absence during 2012. The information is taken from the STATS3 survey of local authorities (LAs) and is analysed by type of school, type of teacher, vacancies by subject and summary information relating to sickness absence.

Key points

Teachers in service (Section 1)

- There were 27,310 full-time equivalent (FTE) teachers in service with LAs, an increase of 333 since January 2012 (*Chart 1, Table 1*).
- There were 26,139 FTE qualified teachers employed at maintained nursery, primary and secondary schools in Wales, an increase of 394 since January 2012 (*Chart 2, Table 2*).
- There were 666 FTE qualified teachers at maintained special schools, a decrease of 26 since January 2012 (*Table 3*).
- The number of FTE qualified teachers providing education other than at school decreased from 327 to 277 between January 2012 and January 2013 (*Table 1*).

Teacher vacancies (Section 2)

- The total number of teacher vacancies in nursery, primary and secondary schools was lower in January 2013 (86) compared with January 2012 (93) (*Tables 4 and 5*).
The total nursery, primary and secondary vacancy rate is 0.3 per cent.
- There were no nursery school vacancies. The number of vacancies for teachers in primary schools was 47, a decrease of 9 compared with January 2012 (*Table 5*).
The vacancy rate in the nursery/primary sector is 0.4 per cent.
- There were 39 vacancies in secondary schools in January 2013, an increase of 4 from January 2012 (*Table 4*).
The vacancy rate in the secondary sector is 0.3 per cent.

Teacher sickness absence during 2012 (Section 3)

- 60 per cent of teachers took sickness absence during 2012, compared with 59 per cent during 2011 (*Table 7*).
- The average annual number of sick-days per teacher taking sickness absence was 11 days (*Table 7*).
- The total number of sick-days taken by teachers during 2012 was 187,377 – over 25,000 days less than during 2011 (*Table 7*).

Statistician: Stephen Hughes
Next update: June 2014 (provisional)

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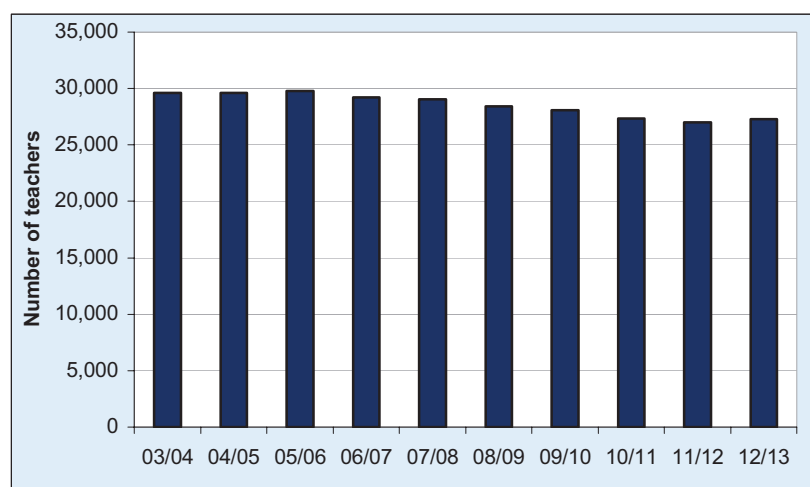
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Section 1: Teachers in Service

The teachers in service data is collected every January by LAs in Wales, and only includes qualified teachers.

Chart 1: Teachers in service with LAs



- 2012/13 has seen the first increase in teacher numbers since 2005/06.
- In the last ten years the largest number of teachers was in 2005/06 with 29,783.

Table 1: Teachers in service with LAs (a)

| | 2008/09 | 2009/10 | 2010/11 | 2011/12 | 2012/13 (b) |
|---|---------------|---------------|---------------|---------------|---------------|
| <i>FTE</i> | | | | | |
| Qualified teachers at: | | | | | |
| LA maintained schools (c): | | | | | |
| Nursery | 75 | 74 | 73 | 57 | 55 |
| Primary | 13,090 | 13,072 | 12,758 | 12,736 | 12,944 |
| Secondary | 12,988 | 12,782 | 12,526 | 12,327 | 12,525 |
| Total | 26,153 | 25,928 | 25,357 | 25,120 | 25,524 |
| Miscellaneous/divided service (d): | | | | | |
| Primary | 417 | 426 | 343 | 324 | 322 |
| Secondary | 371 | 386 | 310 | 301 | 293 |
| Total | 788 | 811 | 653 | 625 | 615 |
| Total | 26,941 | 26,740 | 26,010 | 25,745 | 26,139 |
| LA maintained special schools (c) | 738 | 703 | 684 | 692 | 666 |
| Other qualified teachers providing education other than at school (e) | 430 | 371 | 361 | 327 | 277 |
| Other teachers (f) | 85 | 87 | 100 | 66 | 45 |
| Adult Education Centres (g) | 222 | 184 | 176 | 148 | 183 |
| All teaching staff | 28,417 | 28,084 | 27,332 | 26,977 | 27,310 |
| of which on secondment for one term or more | 28 | 26 | 26 | 22 | 21 |

(a) At January each year.

(b) Two local authorities were unable to provide supply teacher data.

(c) Includes:

- full-time teachers in regular service including those on secondment;
- full-time equivalent (FTE) of part time teachers in regular service;
- full-time teachers in occasional service including agency staff;

(d) Including peripatetic teachers and advisory teachers.

(e) Under the provisions of the Education Act 1944, Section 56 and the Education Act 1981, Section 3. Includes qualified teachers in pupil referral units.

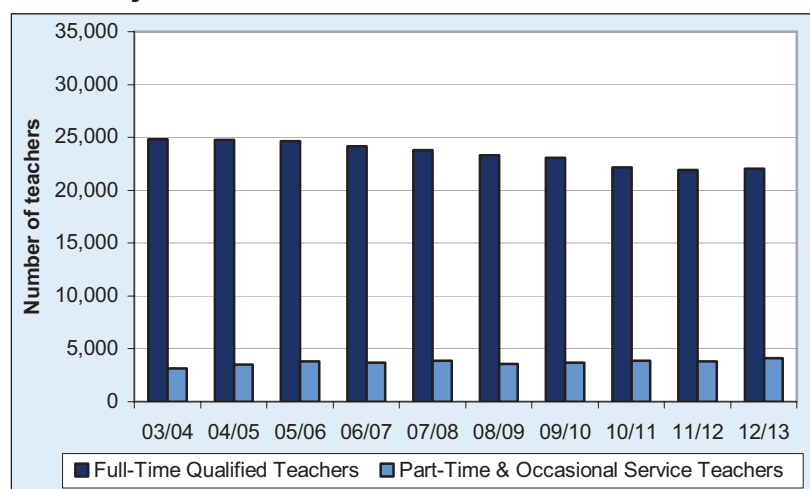
(f) Includes:

- any other full-time teachers in regular service including those on secondment;
- any other FTE of part time teachers in regular service;

(g) Includes:

- full-time teaching staff in regular service including those on secondment;
- FTE of part-time teaching in regular service;
- FTE of hourly paid part time teaching staff;
- FTE of all staff not paid on teaching staff scales but who spend all or part of their time teaching.

Chart 2: Number of full-time, part-time and occasional service teachers at maintained nursery, primary and secondary schools



- The number of full-time qualified teachers has fallen over the last ten years from 24,828 to 22,024.
- The number of part-time and occasional service staff has increased in the last ten years from 3,121 to 4,115.

Table 2: Teachers in service at maintained nursery, primary or secondary schools (a)

| | <i>FTE</i> | | | | |
|---|---------------|---------------|---------------|---------------|---------------|
| | 2008/09 | 2009/10 | 2010/11 | 2011/12 | 2012/13 (b) |
| Qualified teachers in full-time regular service: | | | | | |
| LA maintained: | | | | | |
| Nursery schools | 63 | 59 | 60 | 50 | 45 |
| Primary schools | 10,981 | 10,993 | 10,477 | 10,536 | 10,649 |
| Secondary schools | 11,756 | 11,446 | 11,152 | 10,894 | 10,948 |
| Miscellaneous/divided service | | | | | |
| Primary | 261 | 276 | 221 | 214 | 188 |
| Secondary | 280 | 288 | 236 | 222 | 194 |
| Total | 541 | 564 | 457 | 436 | 382 |
| Total (c) | 23,341 | 23,062 | 22,146 | 21,916 | 22,024 |
| Part-time (FTE) & Teachers in occasional service: (including supply teachers): | | | | | |
| LA maintained: | | | | | |
| Nursery schools | 12 | 15 | 13 | 7 | 10 |
| Primary schools | 2,110 | 2,079 | 2,281 | 2,200 | 2,295 |
| Secondary schools | 1,232 | 1,337 | 1,374 | 1,433 | 1,577 |
| Miscellaneous/divided service | | | | | |
| Primary | 156 | 149 | 121 | 110 | 134 |
| Secondary | 91 | 98 | 75 | 79 | 99 |
| Total | 247 | 248 | 196 | 189 | 233 |
| Total (c) | 3,600 | 3,678 | 3,864 | 3,829 | 4,115 |
| All teaching staff (FTE): | | | | | |
| LA maintained: | | | | | |
| Nursery schools | 75 | 74 | 73 | 57 | 55 |
| Primary schools | 13,090 | 13,072 | 12,758 | 12,736 | 12,944 |
| Secondary schools | 12,988 | 12,782 | 12,526 | 12,327 | 12,525 |
| Miscellaneous/divided service | | | | | |
| Primary | 417 | 426 | 343 | 324 | 322 |
| Secondary | 371 | 386 | 310 | 301 | 293 |
| Total | 788 | 811 | 653 | 625 | 615 |
| Total (c) | 26,941 | 26,740 | 26,010 | 25,745 | 26,139 |

(a) At January each year.

(b) Two local authorities were unable to provide supply teacher data.

(c) Includes those on secondment.

Table 3: Teachers in service with LAs at maintained special schools (a)

| | FTE | | | | |
|---|------------|------------|------------|------------|------------|
| | 2008/09 | 2009/10 | 2010/11 | 2011/12 | 2012/13 |
| Qualified teachers in full-time regular service: | 636 | 613 | 596 | 591 | 572 |
| Part-time (FTE) & Teachers in occasional service: (including supply) | 82 | 90 | 88 | 101 | 94 |
| All teaching staff (FTE) | 738 | 703 | 684 | 692 | 666 |

(a) At January each year.

Includes:

- full-time teachers in regular service including those on secondment;
- fte of part-time teachers in regular service;
- full-time teachers in occasional service;

- The last seven years has seen the number of teachers in maintained special schools fluctuate between 611 and 738.
- The 666 teachers in maintained special schools in 2012/13 is the lowest number since 2005/06.

Section 2: Teacher Vacancies

Teacher vacancies include advertised vacancies on 15 January 2013 for full-time permanent appointments or full-time appointments for at least one term's duration.

Further data for individual subjects and attainment levels can be found in Tables 4 to 6.

Key Points

Teacher vacancies in maintained secondary schools (Table 4)

- In 2012/13, the total number of vacancies in secondary schools has increased since last year, and stood at 39 in January 2013.

Teacher vacancies in maintained primary and nursery schools (Table 5)

- In 2012/13, total vacancies in primary and nursery schools fell to 47, down 11 from the previous year.
- All the vacancies in 2012/13 are in primary schools, none in nursery.

Table 4: Teacher vacancies in maintained secondary schools, by subject (a)

| | 2008/09 | 2009/10 | 2010/11 | 2011/12 | 2012/13 |
|---|------------|------------|------------|------------|------------|
| Mathematics | 6 | 1 | 1 | 7 | 5 |
| Computer Studies/ Information Technology | 0 | 0 | 1 | 1 | 1 |
| Chemistry | 3 | 1 | 0 | 1 | 0 |
| Physics | 3 | 0 | 0 | 0 | 1 |
| Biology | 0 | 1 | 1 | 1 | 1 |
| Other Science (b) | 7 | 1 | 1 | 4 | 1 |
| French | 2 | 1 | 0 | 1 | 0 |
| German | 0 | 0 | 0 | 0 | 0 |
| French/German | 0 | 1 | 1 | 0 | 0 |
| Spanish | 0 | 0 | 0 | 0 | 0 |
| Other languages | 0 | 1 | 1 | 0 | 1 |
| Welsh | 6 | 6 | 0 | 1 | 1 |
| English | 4 | 0 | 1 | 4 | 5 |
| Drama | 1 | 2 | 1 | 0 | 1 |
| History | 0 | 0 | 0 | 1 | 1 |
| Social Studies | 0 | 0 | 0 | 0 | 1 |
| Geography | 1 | 0 | 1 | 1 | 1 |
| Religious Education | 2 | 0 | 1 | 2 | 1 |
| Design and Technology (c) | 2 | 1 | 1 | 1 | 2 |
| Commerce/Business | 0 | 0 | 1 | 0 | 1 |
| Art/Light Craft | 0 | 0 | 1 | 0 | 0 |
| Music | 5 | 2 | 1 | 0 | 0 |
| P.E. | 2 | 3 | 2 | 0 | 0 |
| Special Educational Needs | 2 | 2 | 1 | 1 | 1 |
| Careers | 0 | 0 | 0 | 0 | 0 |
| Other main subjects | 0 | 0 | 1 | 1 | 2 |
| Combined subjects | 0 | 1 | 0 | 0 | 2 |
| Total | 46 | 24 | 18 | 27 | 29 |
| Headteacher vacancies | 3 | 6 | 7 | 5 | 3 |
| Deputy headteacher vacancies | 5 | 3 | 4 | 3 | 7 |
| Total vacancies | 54 | 33 | 29 | 35 | 39 |
| <i>Vacancy rate</i> | <i>0.4</i> | <i>0.3</i> | <i>0.2</i> | <i>0.3</i> | <i>0.3</i> |

(a) At January each year.

(b) Including Key Stage 3 and Key Stage 4 Science.

(c) Includes Home Economics/Needlework.

Table 5: Teacher vacancies in maintained nursery and primary schools (a)

| | 2008/09 | 2009/10 | 2010/11 | 2011/12 | 2012/13 |
|------------------------|------------|------------|------------|------------|------------|
| Nursery schools: | | | | | |
| Headteacher | 0 | 0 | 0 | 1 | 0 |
| Deputy headteacher | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 1 | 0 | 1 | 0 |
| Primary schools: | | | | | |
| Headteacher | 6 | 16 | 16 | 15 | 11 |
| Deputy headteacher | 12 | 6 | 13 | 12 | 12 |
| Other | 25 | 22 | 32 | 29 | 24 |
| Totals: | | | | | |
| Headteacher | 6 | 16 | 16 | 16 | 11 |
| Deputy headteacher | 12 | 6 | 13 | 12 | 12 |
| Other | 25 | 23 | 32 | 30 | 24 |
| Total vacancies | 43 | 45 | 61 | 58 | 47 |
| <i>Vacancy rate</i> | <i>0.3</i> | <i>0.3</i> | <i>0.5</i> | <i>0.4</i> | <i>0.4</i> |

(a) At January each year.

Table 6: Teacher vacancies in maintained special schools (a)

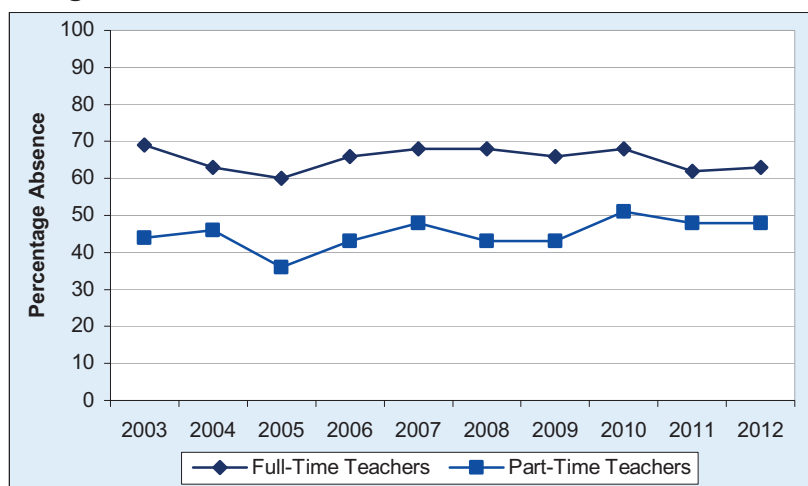
| | 2008/09 | 2009/10 | 2010/11 | 2011/12 | 2012/13 |
|--------------------|----------|----------|----------|----------|----------|
| Special schools: | | | | | |
| Headteacher | 1 | 0 | 0 | 1 | 0 |
| Deputy headteacher | 0 | 0 | 0 | 0 | 0 |
| Other | 4 | 2 | 2 | 1 | 1 |
| Total | 5 | 2 | 2 | 2 | 1 |

(a) At January each year.

Section 3: Teacher Sickness Absence

Sickness absence includes that recorded for full-time and part-time teachers, with permanent contracts or contracts of over 1 month (at maintained schools from 1 January to 31 December).

Chart 3: Percentages of full-time and part-time teachers taking sickness absence



- Over the last ten years the percentage of full-time teachers taking a period of sick leave has varied between 60 and 69 per cent.
- Over the last five years the percentage of all teachers taking sickness absence has varied between 59 and 64 per cent.

Table 7: Sickness absence of teachers in maintained schools: 1 January to 31 December (a)

| | 2008 (c) | 2009 | 2010 | 2011 | 2012 |
|--|----------------|----------------|----------------|----------------|----------------|
| Teachers taking a period of sickness absence (b): | | | | | |
| Total teachers: | | | | | |
| Number | 18,777 | 18,230 | 18,409 | 16,949 | 17,204 |
| Percentage | 64% | 62% | 64% | 59% | 60% |
| Full-time teachers: | | | | | |
| Number | 16,573 | 15,932 | 15,647 | 14,229 | 14,343 |
| Percentage | 68% | 66% | 68% | 62% | 63% |
| Part-time teachers: | | | | | |
| Number | 2,204 | 2,298 | 2,762 | 2,720 | 2,861 |
| Percentage | 43% | 43% | 51% | 48% | 48% |
| Average number of days lost due to sickness: | | | | | |
| per teacher taking a period of sick leave | 14 | 13 | 12 | 13 | 11 |
| per teacher (all teachers) | 9 | 8 | 8 | 7 | 7 |
| Average number of days lost due to sickness: | | | | | |
| per full-time teacher taking a period of sick leave | 13 | 13 | 11 | 13 | 11 |
| per teacher (all full-time teachers) | 9 | 8 | 8 | 8 | 7 |
| Average number of days lost due to sickness: | | | | | |
| per part-time teacher taking a period of sick leave | 14 | 15 | 14 | 12 | 11 |
| per teacher (all part-time teachers) | 6 | 6 | 7 | 6 | 5 |
| Sickness absences by duration (in days): | | | | | |
| Full-time teachers: | | | | | |
| 5 days or less | 68,348 | 62,140 | 58,363 | 50,083 | 52,020 |
| 6 to 20 days | 47,965 | 43,953 | 29,067 | 36,635 | 28,719 |
| more than 20 days | 106,694 | 95,946 | 91,075 | 94,032 | 75,447 |
| Total days sickness absence taken by full-time teachers | 223,007 | 202,038 | 178,505 | 180,750 | 156,186 |
| Part-time teachers: | | | | | |
| 5 days or less | 8,530 | 8,186 | 10,058 | 8,498 | 8,731 |
| 6 to 20 days | 6,388 | 7,833 | 6,537 | 8,409 | 5,772 |
| more than 20 days | 15,984 | 18,116 | 23,251 | 15,660 | 16,688 |
| Total days sickness absence taken by part-time teachers | 30,902 | 34,136 | 39,846 | 32,567 | 31,191 |
| Total days sickness absence | 253,909 | 236,174 | 218,350 | 213,317 | 187,377 |

(a) Sickness absence (including unpaid absence) of teachers with permanent contracts or contracts of more than 1 month.

(b) Headcount, not full-time equivalents.

(c) For 2008 one LA was unable to provide part-time absence data.

Key Quality Information

Caution should be used when looking at data on teacher vacancies, as they are only a snapshot of the year, and are taken as at a single day in January each year.

Source of data

STATS3 data collection from LAs

The STATS3 return is completed every January by each LA in Wales and records the number of teachers in service, and vacant posts. The return covers all maintained establishments as well as peripatetic teachers, advisory and miscellaneous teachers and teachers with service divided between schools and those on secondment.

Definitions

Coverage: Data relating to Middle Schools for the 2013 exercise was recorded with Secondary establishments.

Two LAs were unable to provide supply teacher data. In 2010 the two authorities had a combined figure of around 100 supply teachers.

Teachers: The following teachers, employed by LAs, are included in the STATS3 data collection:

- Head teachers and other teachers regardless of whether they had classroom duties on the survey date.
- Teachers on full-time or part-time regular engagements, of one month or more, including those provided by an agency.
- Permanent and temporary supply teachers.
- Teachers on engagements of less than one month (occasional service - including 'claims based' and agency staff) if they were employed for the whole of the survey date.
- Teachers on leave, sick leave or maternity leave who are still being paid by the authority/school. Teachers, whether full-time or part-time, seconded for service *with the authority from outside the authority's area*.
- Full-time teachers in receipt of full salary whilst full-time on training courses of one term or more.
- Teachers in receipt of full salary whilst on a training course of less than one term.
- Teachers seconded by the authority on full pay.

The following are excluded from the STATS3 data collection:

- Teachers seconded for teaching service in a maintained school or establishment outside the authority's area.
- Unqualified teachers employed in nursery schools and classes under Section 4(1)(a) of Schedule 4 of the Education (Teachers) Regulations 1982.
- Nursery assistants.
- Foreign language assistants.
- Students on teaching practice.
- Teachers employed by colleges in the FE sector.

Teacher vacancies: includes advertised vacancies on 15 January 2013 for full-time permanent appointments or full-time appointments for at least one term's duration.

Sickness absence: includes sickness absence recorded for full-time and part-time qualified and unqualified teachers, with permanent contracts or contracts of over 1 month.

Symbols: The following symbols have been used throughout the publication:

- .. not available
- . not applicable

Rounding: In tables where figures have been rounded to the nearest final digit there may be an apparent discrepancy between the sum of the constituent items and the total as shown.

Other countries' releases

Attached is the latest available release for England (includes data on teachers, vacancies and sickness absence), published on 30 April 2013:

[School Workforce in England: November 2012](#)

Scotland publishes some data on teachers as part of a larger publication on schools. Their latest release was published on 11 December 2012:

[Summary Statistics for Schools in Scotland, No.3 2012 Edition](#)

Related data for Wales

The Welsh Government also releases data **from a different source** (the Pupil Level Annual School Census – PLASC) in the form of a Statistical First Release:

[School Census Results, 2012](#) published on 11 July 2012 (2013 data will be published on 11 July 2013)

Since the above release is from a different source, figures may not match, and therefore caution should be taken when making comparisons.

Who are the key users of this data?

These statistics are used within and outside the Welsh Government. Some of the key users are:

- Ministers and the Members Research Service in the National Assembly for Wales;
- The Department for Education in England;
- Other government departments;
- Local authorities;
- Schools;
- Estyn, Her Majesty's Inspectorate of Education and Training in Wales;
- Wales Audit Office;
- The Department for Education and Skills in the Welsh Government;
- Other areas of the Welsh Government;
- The research community;
- Students, academics and universities;
- Individual citizens and private companies.

Comments on the coverage or presentation of this release are welcomed. Contact details are on the front page.

Data on teachers is also available from the School Census and General Teaching Council for Wales.

We would welcome any feedback on these statistics.



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Mr Darren Millar AM
Chair of the Public Accounts Committee
National Assembly for Wales
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Date: 11 February 2014
Our ref: HVT/2076/fgb
Page: 1 of 4

Dei Darn

COVERING TEACHERS ABSENCE: PAC INQUIRY

Following the PAC inquiry session on 21 January 2013 with the Welsh Government's Director General for Education and Skills, I said that I would provide additional information in relation to three matters that were discussed during the session:

- whether the Data Protection Act prevents the publication of sickness absence data relating to small schools;
- the inadequacy of HR advice provided to schools by local authorities, leading to the education consortia needing to set up their own HR advice service; and
- the lead-in time needed before Estyn could adjust its inspection framework.

(1) Whether the Data Protection Act prevents the publication of sickness absence data relating to small schools

The publication of sickness absence data for small schools could lead to the disclosure of information about the physical or mental health of identifiable individual teachers. Because information about the identity of school staff is generally easily accessible, where a school has only a small number of teachers even aggregate information could reveal information about the health condition of individual teachers. Without a specific legal requirement to publish the information, such as a specific statutory duty (which, as far as we know, is not the case), or consent, such disclosure would contravene the Data Protection Act.

The disaggregation of information, through the use of other information that is readily available, becomes more difficult as the number of teachers increases. Consequently, the risk of disclosure of information that can be linked to individual teachers reduces in larger schools. Therefore, publishing aggregated data for large schools, clusters of schools or at local authority level is less likely to lead to the disclosure of health information regarding identifiable individual teachers.

(2) The inadequacy of HR advice provided to schools by local authorities, leading to the education consortia needing to set up their own HR advice service

Concerns about the HR services provided by local authorities that were identified in my report related to:

- management of sickness absence;
- induction information provided for supply teachers;
- arrangements for pre-employment checks (including the Disclosure & Barring Service);
- the application of the 2010 Agency Worker Regulations within schools;
- the employment status of some supply staff; and
- the employment of friends or relatives of staff without proper selection procedures.

In recent years, local authorities have tended to move away from providing specialist departmental HR advisors (for education, social services etc.) to providing a more generic HR service. Some authorities employ dedicated HR business managers for schools but, in some other authorities, schools are less likely to have a nominated HR officer and may deal with a 'helpdesk' instead.

Currently, most schools purchase HR support from their local authority through a Service Level Agreement (SLA). The agreement sets out the nature and quantity of HR support to be provided, which in some cases may be insufficient to provide the necessary support.

Although we did not identify particular concerns about the generic HR services provided to schools by local authorities, several head teachers commented on the lack of support they had received in dealing with long-term sickness and poor attendance. However, some other head teachers commented favourably on the support they had received from HR and we identified some good examples of effective working between local authority HR and schools, such as in Newport.

Concerns about the adequacy of HR support for schools were also raised in Robert Hill's report on the *Future Delivery of Education Services in Wales*¹. The report recommended that education consortia should have a core HR function specialising in employee relations issues within schools, and that clusters of schools should have HR advisers to support and oversee the operation of the teachers performance appraisal system. These advisers would support head teachers and governors in dealing with grievance, disciplinary and capability issues. Rather than being a recommendation for specialist HR, we consider that this recommendation is a recognition that schools require more

¹ <http://wales.gov.uk/docs/dcells/consultation/130621-delivery-of-education-report-en.pdf>

HR advice generally to operate the relatively new appraisal system, which in time will expand to include other staff in schools.

(3) The lead-in time needed before Estyn could adjust its inspection framework

The current inspection framework for schools does not rule out consideration of cover arrangements but it does not specifically refer to them. Therefore, to ensure that staff absence and cover arrangements are given more specific consideration, Estyn would not need to change its inspection framework; it would only need to amend the guidance.

Currently, several elements of an inspection might pick up on absence and cover issues. In particular, the guidance for secondary school inspections on 'management of staff and resources' states that:

Inspectors should judge how efficiently and effectively leaders and managers plan and carry out strategies to manage staff and resources. Inspectors may consider whether there are any clear management features that contribute to or detract from the efficient management of resources.

They should consider how well leaders and managers:

- *ensure that the school is appropriately staffed to teach the curriculum effectively;*
- *deploy teaching and support staff to make best use of their time, expertise and experience;*
- *identify and meet the development needs of all teaching and support staff through appraisal and performance management systems;*
- *make effective use of teachers' planning, preparation and assessment time;*
- *employ appropriate strategies and processes to meet the statutory requirements of the National Agreement on 'Raising Standards and Tackling Workload' (January 2003);*
- *manage and deploy teaching assistants and non-teaching staff;*
- *provide the best standards of accommodation possible within the school's budget; and*
- *ensure that pupils have enough appropriate learning resources.*

Estyn and the Welsh Government have agreed in broad terms that Estyn will undertake a thematic review, possibly in 2015-16, of whether there has been improvement in teacher absence arrangements against the benchmark set out in Estyn's report on 'The Impact of Teacher Absence' report, which was published on the same day as my report. Although Estyn does not intend to change its school inspection framework, if the follow up thematic report indicates that problems persist, Estyn would include teacher absence in the new local authority inspection framework. Teacher absence does not fall within the remit of regional consortia.

I hope the Committee finds this additional information to be of use in progressing its inquiry.



HUW VAUGHAN THOMAS
AUDITOR GENERAL FOR WALES

Agenda Item 6

Yr Adran Iechyd a Gwasanaethau Cymdeithasol
Cyfarwyddwr Cyffredinol • Prif Weithredwr, GIG Cymru

Department for Health and Social Services
Director General • Chief Executive, NHS Wales



Llywodraeth Cymru
Welsh Government

Mr Darren Millar AM
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Our Ref: DS/KH
06 February 2014

Dear Darren

PAC meeting on Health Finances – 5th November

The committee requested some further information subsequent to my attendance at the above meeting. We have been asked to base this on the Month 9 (end of December) position in relation to NHS financial reporting. I am pleased to respond.

1. The impact of the additional funding allocation

The budget allocation was announced on 15th October. The extra allocation provided further funding of £150.03m. However it should be noted that the extra funding included £16.43m to cover the anticipated costs of new Immunisation programmes, Kalydeco drug funding (for the treatment of patients with cystic fibrosis and the G551D mutation in the CFTR gene) and Voluntary Early Retirement (VER) packages. These were costs which were not included in the Health Boards reported positions at that time and therefore not reflected in their forecasts. The positive impact on the Health Board forecasts would therefore have been £133.60m.

We have indeed seen a generally commensurate reduction in year end forecast in the period since the allocation was confirmed to NHS bodies. It is however important to note that the position is complex and Health Boards have made and will continue to make adjustments to their forecast based on a wide range of factors which affect their ongoing expenditure and savings programmes.

2. Prospects to the year end

As you would expect, Welsh Government is working very closely with all NHS organisations to ensure an acceptable year end position. This involves interactions with Chairs, Chief

Executives and Directors of Finance. I have also established a National Finance Group to ensure we are identifying and constantly adopting best practice and pursuing all national opportunities to improve the financial outturn this year.

We have also taken action to review expenditure in the various programme budgets held centrally within Welsh Government. With particular regard to NHS organisations, our expectation is that some will deliver a small surplus. Others are taking action to drive forward toward a breakeven position. There are a small number of Boards with more significant risks. We are working particularly closely with these organisations to ensure appropriate responsive action is taken.

In overall terms we see the month 10 position as being particularly critical and we would be pleased to provide the Committee with a further update on 17 February when that information is available.

In conclusion I trust this letter conveys the complexity of the position. We are taking action and, I believe, making important progress in enabling an appropriate financial outcome for Health in 2013/14

Finally I must apologise for the delay in sending this letter. The position is fast changing and we were keen to offer the most up to date analysis.

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Sissling'. The signature is written in a cursive style with a large initial 'D' and a long, sweeping tail.

David Sissling



Mr Darren Millar AM
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Our Ref: DS/KH
06 February 2014

Dear Darren

Follow up information – 5th November PAC meeting on Health Finances

I am writing in response to the request from the Committee for additional information on the postponement of elective activity during the winter period.

Elective postponements

The table below shows the number of short notice postponements at an all Wales level since April 2012. These postponements follow decisions based on clinical priorities and the requirement to use capacity to meet the needs of the most urgent or ill patients.

| | Apr | May | June | July | Aug | Sept | Oct | Nov | Dec | Jan | Feb | Mar |
|---------|------|-----|------|------|-----|------|-----|-----|-----|------|-----|-----|
| 2012/13 | 255 | 272 | 262 | 297 | 157 | 109 | 234 | 264 | 300 | 1123 | 583 | 902 |
| 2013/14 | 1219 | 312 | 195 | 415 | 235 | 341 | 262 | 390 | 245 | | | |

The information for December 2013 is currently un-validated. Validated December data will be available on 7 February and is expected to confirm a lower number of postponements in December 2013 in comparison with the same period of 2012.

As you know, Health Boards and Trusts strengthened their planning processes for this winter. This work started some months ago and paid attention to a wide range of areas including:

- Capacity – with up to 490 additional beds (or equivalents) in the plans



- Enhanced staffing and working arrangements
- Reducing delays in discharge - with enhanced partnership working between the NHS and Social Services Departments
- Improved monitoring and intervention arrangements.

Implementation of the plans has been carried out in an efficient manner. They appear to have a beneficial impact with improvement in many key indicators, including the level of postponements of elective activity when comparisons are made to last year. As you would expect, the Welsh Government is working closely with all NHS organisations and monitoring progress on a daily/weekly basis.

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Sissling'. The signature is written in a cursive style with a large initial 'D' and a long, sweeping tail on the 'g'.

David Sissling



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Our Ref: DS/MS/KH

12 February 2014

Dear Darren

PAC meeting on Health Finances – 5th November

I refer to my letter of 6th February regarding the above. I am now in a position to provide the Committee with some further information.

I set out below the figures for month 09 together with the latest draft figures for month 10. (Please note the month 10 figures are due to be formally confirmed by Boards and Trusts on 14th February so they are provided on a draft basis at present)

| Organisation | Forecast Surplus/Deficit Month 09 | Draft Position Month 10 |
|-------------------------------|--|--|
| | £000's | £000's |
| Abertawe Bro Morgannwg | -6,000 | -3,000 |
| Anuerin Bevan | -5,601 | -5,100 |
| Betsi Cadwaladr | -13,000 | -7,500 |
| Cardiff & Vale | -16,320 | -19,320 |
| Cwm Taf | -5,200 | -4,500 |
| Hywel Dda | -17,109 | -18,109 |
| Powys | -19,494 | -19,410 |
| Public Health Wales | 0 | 0 |
| Velindre | 0 | 0 |
| Welsh Ambulance | 0 | 0 |
| NHS Wales | -82,724 | -76,939 |

The table above demonstrates an improvement in the forecast position. We are expecting further positive movement in the period between month 10 and the year end. Welsh Government will continue to work closely with Boards to ensure this occurs.

In the context of the level of risk we have been managing the centrally held budgets on a very robust basis. We have as a consequence created some additional resources that can be used to further help meet the pressures in the NHS. The Committee will now also be aware of the plans to allocate an additional £50m to the Health and Social Services MEG through the supplementary budget.

Taking account of all the developments and actions outlined above there is increasing confidence in the delivery of a balanced year end position.

Finally I must, again, apologise to the Committee for the delay in providing this information.

I trust the further information provided is of assistance.

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Sissling'. The signature is written in a cursive style with a large initial 'D' and a long, sweeping underline.

David Sissling

Agenda Item 7

Yr Adran Iechyd a Gwasanaethau Cymdeithasol
Cyfarwyddwr Cyffredinol • Prif Weithredwr, GIG Cymru

Department for Health and Social Services
Director General • Chief Executive, NHS Wales



Llywodraeth Cymru
Welsh Government

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Our Ref: DS/KH
11 February 2014

Dear Darren

Public Accounts Committee – Unscheduled Care

Thank you for your letter of 21 January in which the committee requested some further information. I am happy to respond.

1) An update on the recent changes made to GP contracts and the impact on access to unscheduled care

Agreement has been reached with GPC Wales on changes to the GMS Contract for 2014/15.

The contract places greater reliance on the professionalism of GPs to use their clinical judgement through the removal of 300 Quality and Outcome Framework (QOF) points. These changes reduce unnecessary patient testing, reduce the frequency of patient recall and enable GPs to spend more time caring for the most vulnerable patients with complex care needs, in particular, the frail elderly. This will help to avoid unnecessary hospital admissions for this group.

The delivery of local health care will be improved through the introduction of a new Local Service Development domain. GP practices will be required to improve the coordination of care, enhance the integration of health and social care and develop collaborative working with local communities and networks.

The Local Service Development domain also requires GP practices to participate in three national care pathways:

- Minimising the harms of poly pharmacy
- Improving end of life care
- Understanding Cancer care pathways

Of the three pathways, 'Minimising the harms to poly pharmacy' has a direct link to unscheduled care. It is estimated up to 6.5% of hospital admissions relate to this issue. GPs will be required to undertake an in depth medication review for all patients aged 85 years and over receiving 6 or more medications. This work will inform the development of the strategy for medication reviews.

'Understanding cancer care pathways' will engage GPs in understanding patient experience. The pathway aims to identify practical steps to improve early diagnosis and timely management. By analysing each new case of lung and gastrointestinal cancer, GPs will identify themes (for example, late presentation, delayed access to diagnostics, late referral) in patient experience which in turn will highlight areas to focus activity. Whilst not directly impacting unscheduled care, improvements in early diagnosis and timely management of this condition will support more patients with cancer through Primary and planned care.

A further element of the Local Service Development domain requires GPs to undertake a review of the provision of services within their practice and agree shared local objectives with the GP cluster. This review of services will build on the Quality and Outcome Framework in relation to the analysis of referrals, accident and emergency attendances, emergency admissions to hospitals and patient risk profiling.

2) Details of the action being taken by Welsh Government to promote immunisation outside of epidemics

The Welsh Government works with Public Health Wales and Health Boards to identify barriers to uptake of vaccinations, to improve the delivery of vaccination programmes and support Health Boards in their efforts to improve vaccination rates.

Vaccination programmes are monitored by the Wales Immunisation Group which comprises representatives from Welsh Government, Public Health Wales, Directors of Public Health, Health Board Immunisation Co-ordinators and primary care. The Group meets quarterly.

The NHS Delivery Framework includes as Tier 1 measures:

- 95% of children are fully immunised by the age of four years;
- 75% of people in at risk groups are vaccinated against seasonal flu, along with 50% of NHS staff with direct patient contact.

All health boards have submitted plans to the Chief Medical Officer for meeting the Tier 1 requirements. Routine monitoring is conducted through the NHS Delivery Framework processes and appropriate escalation mechanisms are activated as required.

This year, Public Health Wales (PHW) has accepted a 'systems leadership' role for the seasonal flu campaign and is working with health boards to support and deliver agreed activities to drive up the seasonal flu vaccination rates. Responsibility for flu communication activity in Wales has also been delegated to PHW. This has seen the introduction of the Flu Fighters campaign aimed at promoting uptake among front line NHS staff.

Welsh Government policy circular (2005)81 requires the follow up of children who have missed one or more doses of MMR at entry to primary school, secondary school and when the teenage booster vaccine is offered. This provides at least three further routine opportunities for children who have missed a routine dose of MMR to be offered a 'catch up' vaccination.

The Chief Medical Officer and Public Health Wales recommend that health professionals use every type of encounter with adolescents or young adults as an opportunity to check full immunisation status.

The Chief Medical Officer has asked Health Board Chief Executives to check the MMR status of their staff and instigate wider checks on staff immunisation against all infectious diseases as provided for in the UK. Public Health Wales is supporting health boards by producing good-practice guidance for new and existing staff.

The "Child Health Immunisation Process Standards - CHIPS" was produced by Public Health Wales in 2011 and provides national minimum standards for childhood immunisation and data. This supports improved information handling and accuracy in recording immunisations within existing systems.

A range of materials is available to the public and health professionals to help promote awareness of immunisations.

3) An outline of the work being undertaken by Welsh Government to educate the public on the alternative options available for treatment as opposed to attending A&E

The Choose Well campaign is a long term initiative to educate the public on how to access the right level of care to meet their needs when they have an illness or injury. The Campaign is supported by a free smartphone app and highlights the range of Health Services available. The app explains what each NHS service does and when they should be used. The app also features contact information, opening hours and directions to health services.

In addition to Choose Well, the Keep Well This Winter campaign run by Age Cymru is promoted by NHS Direct Wales. The campaign is specifically directed at keeping older people healthy at home. Both the Choose Well Wales campaign and NHS Direct Wales emphasise the importance of using alternatives to hospital visits where appropriate.

The Welsh Government established the Choose Pharmacy service in pathfinder sites in Cwm Taf and Betsi Cadwaladr Health Boards in October 2013. Choose Pharmacy will involve approved pharmacists offering confidential NHS consultations and where appropriate, providing treatment to patients who would otherwise present at other NHS services.

4) Details of any work being undertaken to move towards greater co-location of GP out of hours services and A&E departments and whether consideration has been given to ensuring consistency of provision across Wales (with the exception of Powys)

Local health boards have developed a number of service models for GP out of hours services designed to meet their local population needs.

Abertawe Bro Morgannwg University Health Board (ABMU) has a co-located GP Out of Hours (OoH) service with either an A&E Department or Minor Injuries Unit (MIU) in all four of their main hospitals.

Aneurin Bevan Health Board (AB) has three GP OoH services, two of which are co-located with an A&E Department or MIU (Nevill Hall Hospital and Ysbyty Ystrad Fawr). The third OoH Service is not co-located at the Royal Gwent Hospital but is proximal – being located at the nearby St Woolos Hospital.

In Betsi Cadwaladr University Health Board (BCUHB) two of three sites (Bangor and Wrexham) have GP OoH and A&E co-located. The Glan Clwyd site has units separated across the entrance road to the main hospital (approximately 100 metres distance). However, unlike Bangor and Wrexham, Glan Clwyd has GP presence knitted into the team within A&E at peak times. There is also co-location of GP OoH services with the Llandudno MIU.

Cardiff and Vale University Health Board (CVUHB) has one of their three OoH services co-located with A&E at the University Hospital of Wales.

Cwm Taf Health Board (CTHB) has four operational OoH services (two at community hospitals and two at the District General Hospitals). The OoH service at Prince Charles Hospital is co-located with the MIU section of A&E. The OoH service at Royal Glamorgan Hospital is located in the Diabetic centre which is a short walk from the A&E Department.

Hywel Dda Health Board (HDHB) has co-located OoH services within the Local Emergency Department at Prince Philip Hospital.

The above indicates the significant extent to which GP Out of Hours services are co-located. There are however variations in the detailed models of care. Welsh Government officials are reviewing relevant information including the evidence of positive impact. We will

direct the outcomes of this work to the Unscheduled Care Programme Steering Board to ensure appropriate consistency.

5) Details of any work being undertaken by Welsh Government to share good practice between Health Boards on managing Unscheduled Care

The Welsh Government holds quarterly Seasonal Planning Group meetings, attended by senior representatives of Local Health Boards, WAST and Local Authorities. The Group works to improve planning arrangements and share good practice by working in co-operation with key partners. It also provides assurance to the Welsh Government that NHS Wales are operationally ready and resilient to deliver services throughout periods of high demand such as winter.

As part of the Seasonal Planning work, the Welsh Government organised a Winter Planning Forum which was held in Cardiff on 10 September 2013. LHBs, Social Care and WAST representatives presented their joint-plans for the forthcoming winter period. The event provided an opportunity for engagement, constructive peer review and sharing of best practice.

Following the Seasonal Planning Group meeting on 9 December, the Welsh Government identified and shared relevant good practice with Local Health Boards, WAST and Local Authorities.

The Welsh Government hold senior level weekly winter planning calls with the Health Boards and WAST. These calls enable the sharing of good practice and have increased engagement between services.

Dr Grant Robinson was appointed as Unscheduled Care Clinical lead in September 2013. Dr Robinson has been working with leaders from health and social care to secure improvement across pathways of unscheduled care and to ensure best practice is shared.

A National Patient Flow Collaborative has been established by the 1000 lives improvement team. Health Boards have created project teams to drive forward improvements in patient flow. Specialist staff training is underway. A collaborative learning event, held in December 2013, was attended by around 80 staff. Each Health Board will be attending an Executive Team masterclass and on site workshops before the end of March 2014.

6) Details of any work to address the requirement that care homes must transfer service users to an emergency department following a fall – even if this may not be clinically appropriate.

It is not national policy to require care homes to transfer residents to a hospital emergency department following a fall regardless of their clinical needs. Care and Social Services Inspectorate Wales (CSSIW) guidance makes it clear that a hospital admission is only one

outcome of a fall and only when certain criteria have been met. Decisions following a fall are taken on the basis of the individuals clinical and personal circumstances.

7) Details of any action being taken to review patient medication on admission to A&E to determine the extent of medication related complications and their impact on unscheduled care

Adverse medication-related events have been reported to account for up to 6.5% of hospital admissions in England. Limited work has been undertaken in Wales to verify the number of medicine-related admissions. However, data collected as part of a study at Wrexham Maelor Hospital since April 2006 reflects a similar percentage.

Data from the Wrexham Maelor study was presented at an all Wales clinical leadership and engagement showcase conference in 2013, a North Wales Medicines Research Symposium in July 2013 and at the All Wales Prescribing Advisory Group (AWPAG) meeting in December 2013. AWPAG have established a working group to take the work forward.

Thematic analysis of the data collected in the Wrexham Maelor study has revealed that:

- A wide range of medicines are involved in medicine-related admissions
- The medicine-related admissions identified have involved dispensing, prescribing, medicine monitoring and IT system errors as contributory factors.
- Increased patient susceptibility during acute illness e.g. acute kidney injury has also been identified as contributing to medicine related admissions.


8) An update on the timescales for implementing a revised suite of performance indicators for Unscheduled Care

New unscheduled care performance measures will be piloted from April 2014. The pilot will be reviewed after three months.

9) An update on the timescales for the implementation of the 111 service

In my letter of 14th January, I provided you with a provisional timeline for the development of a 111 service. This has been agreed by the 111/OOH work-stream of the Improving Unscheduled Care Steering Board but remains subject to the agreement of the Board, which is meeting on 19th February 2014.

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Sissley'. The signature is written in a cursive style with a large initial 'D'.